



Last Updated: 07/29/2022

Personal, Respite and Companion Care Rate Increases, Effective July 1, 2019

The purpose of this bulletin is to inform providers that rates for personal care services will increase, effective July 1, 2019. In accordance with Item 303.NNN of the 2019 Virginia Acts of Assembly, Consumer Directed and Agency Directed Personal Care, Respite Care, and Companion Care rates will increase by 2.0%. The rate changes are shown in the tables below and will be posted on the DMAS website at: <http://www.dmas.virginia.gov/#/longtermwaivers>.

Agency Directed Personal Care Services			
Procedure Code	Code Description	Location	Rate Effective 7/1/2019
T1019	Personal Care	NOVA	\$16.13
T1019	Personal Care	ROS	\$13.70
T1005	Respite Care	NOVA	\$16.13
T1005	Respite Care	ROS	\$13.70
S5135	Companion Care	NOVA	\$16.13
S5135	Companion Care	ROS	\$13.70

Consumer Directed Personal Care Services			
Procedure Code	Code Description	Location	Rate Effective 7/1/2019
S5126	Personal Care	NOVA	\$12.17
S5126	Personal Care	ROS	\$9.40
S5150	Respite Care	NOVA	\$12.17
S5150	Respite Care	ROS	\$9.40
S5136	Companion Care	NOVA	\$12.17
S5136	Companion Care	ROS	\$9.40



Medicaid Expansion

New adult coverage begins January 1, 2019. Providers will use the same web portal and enrollment verification processes in place today to verify Medicaid expansion coverage. In ARS, individuals eligible in the Medicaid expansion covered group will be shown as "MEDICAID EXP." If the individual



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is enrolled in managed care, the “MEDICAID EXP” segment will be shown as well as the managed care segment, “MED4” (Medallion 4.0), or “CCCP” (CCC Plus). Additional Medicaid expansion resources for providers can be found on the DMAS Medicaid Expansion webpage at: <http://www.dmas.virginia.gov/#/medex>.

PROVIDER CONTACT INFORMATION & RESOURCES	
Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	www.virginiamedicaid.dmas.virginia.gov
Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996
KEPRO Service authorization information for fee-for-service members.	https://dmas.kepro.com/
Managed Care Programs Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.	
Medallion 4.0	http://www.dmas.virginia.gov/#/med4
CCC Plus	http://www.dmas.virginia.gov/#/cccplus
PACE	http://www.dmas.virginia.gov/#/longtermprograms
Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com , email: VAProviderQuestions@MagellanHealth.com , or call: 1-800-424-4046
Provider HELPLINE Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627